



CREDIT APPLICATION

Application for credit facilities with CONTROLAB SOUTH AFRICA (PTY) LTD

A: COMPANY DETAILS

Registered Name of Company:

Trading Name of Company:

Entity Type: Sole Trader (Pty) Ltd cc Trust Partnership

Company Registration No.:

VAT Registration No.:

Postal Address:

Physical Address:

Telephone No.:

Facsimile No.:

Cell No.:

Email Address:

B: DETAILS OF DIRECTORS/MEMBERS

Detail 1 Full Name:

Identity No.:

Detail 2 Full Name:

Identity No.:

Detail 3 Full Name:

Identity No.:

C: CONTACT PERSONS

Accounts/Financial

Name of Contact Person:

Telephone No.:

Cell No.:

Email:

D: TRADE REFERENCES

Name of Trade Reference:

Telephone No.:

Name of Trade Reference:

Telephone No.:

Name of Trade Reference:

Telephone No.:

E: BANKING INFORMATION

Bank Name:

Branch Name:

Branch Code:

Account Name:

Account No.:

F: CREDIT REQUIREMENTS

Credit Limit Required:

Payment Method (ie: cheque/EFT):

Payment Terms Required:

Order No. Required:

Please note that our payment terms are strictly thirty (30) days from date of statement. The banking details are as follows:

Bank: Nedbank**Branch Code:** 198765**Branch:** Business Eastern Cape**Account No.:** 1001822382**G: DECLARATION**

I/we do hereby declare that all the information declared herein is true and correct. I/we furthermore undertake to advise Messrs Controlab South Africa (Pty) Ltd of any changes to the status of the company/individual as and when they occur. I/we acknowledge that any and all work undertaken by Controlab will be settled in full within the prescribed thirty (30) days period subject to any terms and conditions as agreed with the management of Controlab South Africa (Pty) Ltd.

SIGNED: DATE:

NAME: CAPACITY:

COMPANY STAMP:

H: FOR OFFICE USE

Approved/Declined: Name:

Date: Signed: